

Amendment No. 1 to SB0176

Bailey
Signature of Sponsor

AMEND Senate Bill No. 176

House Bill No. 184*

by deleting from subsection (d) in SECTION 1 the language "Notwithstanding subsection (c), on" and substituting "Notwithstanding subsection (c), and except as provided in subsection (i), on".

AND FURTHER AMEND by deleting from subdivision (e)(1) in SECTION 1 the language "The board shall grant" and substituting "Except as provided in subsection (i), the board shall grant".

AND FURTHER AMEND by deleting subdivision (e)(4)(B)(i)(b) in SECTION 1 and substituting:

(b) Include the following information on the prescription order:

- (1) The name of the prescribing advanced practice registered nurse;
- (2) If the advanced practice registered nurse is subject to a collaboration requirement under subsection (i), the name of the collaborating physician;
- (3) The name and strength of the drug prescribed;
- (4) The quantity of the drug prescribed;
- (5) Instructions for the proper use of the drug; and
- (6) The date the prescription order was issued;

AND FURTHER AMEND by deleting subdivision (e)(4)(B)(ii)(a) in SECTION 1 and substituting:

(a) Include the following information on the prescription order:

- (1) The name of the prescribing advanced practice registered nurse;
- (2) If the advanced practice registered nurse is subject to a collaboration requirement under subsection (i), the name of the collaborating physician;
- (3) The name and strength of the drug prescribed;
- (4) The quantity of the drug prescribed;

(5) Instructions for the proper use of the drug; and

(6) The date the prescription order was issued;

AND FURTHER AMEND by deleting subsection (i) in SECTION 1 and substituting:

(i)

(1) Notwithstanding any law to the contrary, and except as otherwise provided in this section:

(A) An advanced practice registered nurse described in subdivision (a)(1)(B) who holds prescribing authority pursuant to this section may exercise that authority without supervision by or collaboration with a physician; and

(B)

(i) During the first three (3) years following the date of initial licensure as an advanced practice registered nurse pursuant to this section, an advanced practice registered nurse described in subdivision (a)(1)(A), (a)(1)(C), or (a)(1)(D) shall not exercise prescribing authority except with supervision by or in collaboration with a physician in a manner that complies with subdivision (i)(2).

(ii) For purposes of subdivision (i)(1)(B)(i), an advanced practice registered nurse's date of initial licensure is the date that:

(a) The individual is issued a first license as an advanced practice registered nurse by the board, pursuant to subdivision (c)(1);

(b) The individual is issued a first license as an advanced practice registered nurse by the licensing authority of another state or territory of the United States, if the individual is licensed pursuant to subdivision (c)(3); or

(c) The individual is issued a first advanced practice registered nurse certificate or its equivalent from another state or territory of the United States, if the individual is licensed pursuant to subsection (d).

(2)

(A) An advanced practice registered nurse licensed pursuant to this section shall file a notice with the board, containing the name of the advanced practice registered nurse, the name of the licensed physician collaborating with the advanced practice registered nurse who has control and responsibility for prescriptive services rendered by the advanced practice registered nurse, and a copy of the formulary describing the categories of legend drugs to be prescribed and issued by the advanced practice registered nurse. The advanced practice registered nurse shall update this information.

(B)

(i) The licensed advanced practice registered nurse is authorized to prescribe and issue controlled substances listed in Schedules II, III, IV, and V of title 39, chapter 17, part 4, upon joint adoption of physician collaboration rules concerning controlled substances pursuant to subdivision (i)(3).

(ii) Notwithstanding subdivision (i)(2)(B)(i), an advanced practice registered nurse shall not prescribe Schedules II, III, and IV controlled substances unless the prescription is specifically authorized by the formulary or expressly approved after consultation with the collaborating physician before the initial issuance of the prescription or dispensing of the medication.

(iii) A licensed advanced practice registered nurse may only prescribe or issue a Schedule II or III opioid listed on the formulary for a maximum of a non-refillable, thirty-day course of treatment unless specifically approved after consultation with the collaborating physician before the initial issuance of the prescription or dispensing of the medication. This subdivision (i)(2)(B)(iii) does not apply to prescriptions issued in a hospital, a nursing home licensed under title 68, or inpatient facilities licensed under title 33.

(C)

(i) A prescription written and signed or drug issued by an advanced practice registered nurse under collaboration with and the control of a collaborating physician is deemed to be that of the advanced practice registered nurse. A prescription issued by an advanced practice registered nurse pursuant to this section must be entered in the medical records of the patient and must be written on a preprinted prescription pad bearing the name, address, and telephone number of the collaborating physician and of the advanced practice registered nurse, and the advanced practice registered nurse shall sign each prescription so written. Where the preprinted prescription pad contains the names of more than one (1) physician, the advanced practice registered nurse shall indicate on the prescription which of those physicians is the advanced practice registered nurse's primary collaborating physician by placing a checkmark beside or a circle around the name of that physician.

(ii) A handwritten prescription order for a drug prepared by an advanced practice registered nurse who is authorized by law to prescribe a drug must be legible so that it is comprehensible by the pharmacist who fills the prescription. The handwritten prescription order must contain the name of the prescribing nurse practitioner, the name and strength of the drug prescribed, the quantity of the drug prescribed, handwritten in letters or in numerals, instructions for the proper use of the drug and the month and day that the prescription order was issued, recorded in letters or in numerals or a combination thereof. The prescribing advanced practice registered nurse must sign the handwritten prescription order on the day it is issued, unless the prescription order is:

(a) Issued as a standing order in a hospital, a nursing home, or an assisted care living facility as defined in § 68-11-201; or

(b) Prescribed by a nurse practitioner in the department of health or local health departments or dispensed by the department of health or a local health department as stipulated in § 63-10-205.

(iii) A typed or computer-generated prescription order for a drug issued by an advanced practice registered nurse who is authorized by law to prescribe a drug must be legible so that it is comprehensible by the pharmacist who fills the prescription order. The typed or computer-generated prescription order must contain the name of the prescribing advanced practice registered nurse, the name and strength of the drug prescribed, the quantity of the

drug prescribed, recorded in letters or in numerals, instructions for the proper use of the drug and the month and day that the typed or computer-generated prescription order was issued, recorded in letters or in numerals or a combination thereof. The prescribing advanced practice registered nurse must sign the typed or computer-generated prescription order on the day it is issued, unless the prescription order is:

(a) Issued as a standing order in a hospital, nursing home, or an assisted care living facility as defined in § 68-11-201; or

(b) Prescribed by a nurse practitioner in the department of health or local health departments or dispensed by the department of health or a local health department as stipulated in § 63-10-205.

(iv) This section does not prevent a nurse practitioner from issuing a verbal prescription order.

(v)

(a) A handwritten, typed, or computer-generated prescription order must be issued on either tamper-resistant prescription paper or printed utilizing a technology that results in a tamper-resistant prescription that meets the current centers for medicare and medicaid service guidance to state medicaid directors regarding § 7002(b) of the United States Troop Readiness, Veterans' Care, Katrina Recovery and Iraq Accountability Appropriations Act of 2007 (P.L. 110-28), and meets or exceeds specific TennCare requirements for tamper-resistant prescriptions.

(b) Subdivision (i)(2)(C)(v)(a) does not apply to prescriptions written for inpatients of a hospital; outpatients of a hospital where the doctor or other person authorized to write prescriptions writes the order into the hospital medical record and then the order is given directly to the hospital pharmacy and the patient never has the opportunity to handle the written order; a nursing home or an assisted care living facility as defined in § 68-11-201; inpatients or residents of a mental health hospital or residential facility licensed under title 33; or individuals incarcerated in a local, state, or federal correctional facility.

(D) The advanced practice registered nurse shall maintain a copy of the protocol the advanced practice registered nurse is using at the advanced practice registered nurse's practice location and shall make the protocol available upon request by the board of nursing, the board of medical examiners, or authorized agents of either board.

(E) An advanced practice registered nurse licensed pursuant to this chapter, who provides services in a free clinic as defined in § 63-6-703 or engages in the voluntary provision of healthcare services as defined in § 63-6-703, may arrange for required personal review of the advanced practice registered nurse's charts by a collaborating physician in the office or practice site of the physician or remotely via HIPAA-compliant electronic means rather than at the site of the clinic. For purposes of this subdivision (i)(2)(E), "HIPAA-compliant" means that the entity has implemented technical policies and procedures for electronic information systems that meet the requirements of 45 CFR 164.312.

(3) A rule that purports to regulate the collaboration of advanced practice registered nurses with physicians must be jointly adopted by the board of medical examiners and the board of nursing.

AND FURTHER AMEND by deleting SECTION 12 and substituting:

SECTION 12. Tennessee Code Annotated, Section 55-21-113, is amended by deleting the section and substituting the following:

(1) An advanced practice registered nurse licensed under title 63, chapter 7, and a physician assistant licensed under title 63, chapter 19, have the same authority that a physician has under this part to issue certified statements of disability or deafness to accompany the application of persons who are disabled or deaf or hard of hearing to obtain the appropriate registration, license plates, placards, and decals from the department, as described in this part.

(2) An advanced practice registered nurse that is subject to a collaboration requirement under § 63-7-123(i) has the authority granted by this section only if the authority is expressly included in the written protocol developed jointly by the supervising physician and the advanced practice registered nurse setting forth the range of services that may be performed by the physician assistant.

(3) A physician assistant has the authority granted by this section only if the authority is expressly included in the written protocol developed jointly by the supervising physician and the physician assistant setting forth the range of services that may be performed by the physician assistant.

AND FURTHER AMEND by deleting SECTION 16 and substituting:

SECTION 16. Tennessee Code Annotated, Section 63-6-243(b)(1), is amended by deleting the subdivision and substituting the following:

(1) Hormone replacement therapy must be:

(A) Performed by:

(i) A physician licensed under this chapter or chapter 9 of this title; or

(ii) An advanced practice registered nurse licensed under chapter 7 of this title, who is not subject to a collaboration requirement under § 63-7-123(i); or

(B) Delegated by the physician to:

(i) A physician assistant licensed pursuant to chapter 19 of this title; or

(ii) An advanced practice registered nurse licensed under chapter 7 of this title, who is subject to a collaboration requirement under § 63-7-123(i); and

AND FURTHER AMEND by deleting SECTION 18 and substituting:

SECTION 18. Tennessee Code Annotated, Section 63-6-802(9), is amended by deleting the subdivision and substituting the following:

(9) "Referral" means a written or telecommunicated authorization for genetic counseling services from:

(A) A physician licensed to practice medicine in all its branches;

(B) An advanced practice registered nurse licensed under chapter 7 of this title, who is not subject to a collaboration requirement under § 63-7-123(i);

(C) An advanced practice registered nurse licensed under chapter 7 of this title, who is subject to a collaboration requirement under § 63-7-123(i), and who has an agreement and signed protocols with a supervising physician that authorizes referrals to a genetic counselor; or

(D) A physician assistant who has an agreement and signed protocols with a supervising physician that authorizes referrals to a genetic counselor; and

AND FURTHER AMEND by deleting SECTION 22 and substituting:

SECTION 22. Tennessee Code Annotated, Section 63-7-124(c), is amended by deleting the language "; provided, that this requirement does not supersede any protocol under which a nurse practitioner is rendering service to a patient pursuant to § 63-6-204 or § 63-7-123" and substituting the language "; provided, that this requirement does not supersede a protocol under which an advanced practice registered nurse is rendering service to a patient pursuant to § 63-6-204 or § 63-7-123".

AND FURTHER AMEND by deleting SECTION 28 and substituting:

SECTION 28. Tennessee Code Annotated, Section 63-32-105(a)(18), is amended by deleting the subdivision and substituting:

(18) For the profile of an advanced practice registered nurse licensed under chapter 7 of this title, who is subject to a collaboration requirement under § 63-7-123(i), the name of the licensee's collaborating physician; and

AND FURTHER AMEND by deleting SECTION 29 and substituting:

SECTION 29. Tennessee Code Annotated, Section 63-32-115(a), is amended by deleting the language "between the physician and the holder of a certificate of fitness pursuant to § 63-7-123" and substituting the language "between the physician and an advanced practice registered nurse licensed under chapter 7 of this title, who is subject to a collaboration requirement under § 63-7-123(i)".

AND FURTHER AMEND by deleting SECTION 30 and substituting:

SECTION 30. Tennessee Code Annotated, Section 63-32-115(d), is amended by deleting the subsection and substituting the following:

(d) This section does not repeal or override the confidentiality provisions contained in title 53, chapter 10, part 3, except to the extent that the department uses the information to update the existence of:

(1) A collaborating relationship between a physician and an advanced practice registered nurse licensed under chapter 7 of this title, who is subject to a collaboration requirement under § 63-7-123(i); or

(2) A collaborating relationship between a physician and a physician assistant licensed under § 63-19-105.

AND FURTHER AMEND by deleting SECTION 31, SECTION 32, and SECTION 33 and renumbering the remaining sections accordingly.